

DECLARATION

As a below named inventors, we declare that:

Our residence, post office address and citizenship are as stated below next to our names; We believe we are the original, first and joint inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled: SYNTHESIS OF OLIGOSACCHARIDES AND GLYCOLIPIDS USING BACTERIAL GLYCOSYLTRANSFERASES the specification of which was filed on International Filing Date July 23, 2003, as International Application Nos. PCT/US03/023155 and PCT/US03/023057, U.S. Application No. 10/521,138, and was amended on _____ (if applicable).

We have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. We acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56. We claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Country	Application No.	Date of Filing	Priority Claimed Under 35 USC 119
PCT	PCT/US03/023155	07/23/2003	yes
PCT	PCT/US03/023057	07/23/2003	yes

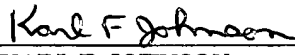
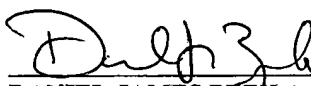
We hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date
60/398,156	07/23/2002
60/424,894	11/08/2002

Full Name of Inventor 1:	Last Name: JOHNSON	Suffix:	First Name: KARL	Middle Name or Initial: F.
Residence & Citizenship:	City: Hatboro		State/Foreign Country: Pennsylvania	Country of Citizenship: United States
Post Office Address:	Post Office Address: 5320 Ivystream Road		City: Hatboro	State/Country: Pennsylvania Postal Code: 19040
Full Name of Inventor 2:	Last Name: BEZILA	Suffix:	First Name: DANIEL	Middle Name or Initial: James
Residence & Citizenship:	City: Philadelphia		State/Foreign Country: Pennsylvania	Country of Citizenship: United States
Post Office Address:	Post Office Address: 715 Red Lion Road, 2nd Floor		City: Philadelphia	State/Country: Pennsylvania Postal Code: 19115

Full Name of Inventor 3:	Last Name: TAYLOR	Suffix:	First Name: DIANE	Middle Name or Initial: E.
Residence & Citizenship:	City: Edmonton		State/Foreign Country: Canada	Country of Citizenship: Canada
Post Office Address:	Post Office Address: 3911 118 Street		City: Edmonton	State/Country: Canada Postal Code: T6J 1X2
Full Name of Inventor 4:	Last Name: SIMALA-GRANT	Suffix:	First Name: JOANNE	Middle Name or Initial:
Residence & Citizenship:	City: Edmonton		State/Foreign Country: Canada	Country of Citizenship: Canada
Post Office Address:	Post Office Address: 10115 87 Avenue		City: Edmonton	State/Country: Canada Postal Code: T6E 2P3
Full Name of Inventor 5:	Last Name: RASKO	Suffix:	First Name: DAVID	Middle Name or Initial:
Residence & Citizenship:	City: Arlington		State/Foreign Country: Virginia	Country of Citizenship: Canada
Post Office Address:	Post Office Address: 2500 Clarendon Boulevard, Apt. 627		City: Arlington	State/Country: Virginia Postal Code: 22201

We further declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1  KARL F. JOHNSON Date: <u>October 21, 2005</u>	Signature of Inventor 2  DANIEL JAMES BEZILA Date: <u>10/25/05</u>	Signature of Inventor 3 _____ DIANE E. TAYLOR Date: _____
Signature of Inventor 4 _____ JOANNE SIMALA-GRANT Date: _____	Signature of Inventor 5 _____ DAVID RASKO Date: _____	

Full Name of Inventor 3:	Last Name: TAYLOR	Suffix:	First Name: DIANE	Middle Name or Initial: E.
Residence & Citizenship:	City: Edmonton		State/Foreign Country: Canada	Country of Citizenship: Canada
Post Office Address:	Post Office Address: 3911 118 Street		City: Edmonton	State/Country: Canada Postal Code: T6J 1X2
Full Name of Inventor 4:	Last Name: SIMALA-GRANT	Suffix:	First Name: JOANNE	Middle Name or Initial:
Residence & Citizenship:	City: Edmonton		State/Foreign Country: Canada	Country of Citizenship: Canada
Post Office Address:	Post Office Address: 10115 87 Avenue		City: Edmonton	State/Country: Canada Postal Code: T6E 2P3
Full Name of Inventor 5:	Last Name: RASKO	Suffix:	First Name: DAVID	Middle Name or Initial:
Residence & Citizenship:	City: Arlington		State/Foreign Country: Virginia	Country of Citizenship: Canada
Post Office Address:	Post Office Address: 2500 Clarendon Boulevard, Apt. 627		City: Arlington	State/Country: Virginia Postal Code: 22201

We further declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1 _____ KARL F. JOHNSON Date: _____	Signature of Inventor 2 _____ DANIEL JAMES BEZILA Date: _____	Signature of Inventor 3 <i>Diane E. Taylor</i> _____ DIANE E. TAYLOR Date: <i>Nov 17/05</i>
Signature of Inventor 4 <i>Joanne Simala-Grant</i> _____ JOANNE SIMALA-GRANT Date: <i>Nov 17/05</i>	Signature of Inventor 5 <i>David Rasko</i> _____ DAVID RASKO Date: <i>Nov 14/05</i>	

10/521138

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PTO/SB/80 (11-04)

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

I hereby appoint:

☒ Practitioners associated with the Customer Number:

20350

OR

☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number	Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:

☒ The address associated with Customer Number:

20350

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone			Fax


Assignee Name and Address:

Neose Technologies, Inc.
102 Witmer Road
Horsham, PA 19044

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature		Date	3/31/2005
Name	Debra J. Poul	Telephone	215-315-9000
Title	Senior Vice President, General Counsel		